



California Medical Waste Management Program

CURRENT FEES

A medical waste generator, subject to the registration requirements of the Medical Waste Management Act, shall submit the appropriate annual registration fee to the Department of Health Services, Medical Waste Management Program, P.O. Box 997413, MS 7405, Sacramento, CA 95899-7413. The fee can be determined from the list below, and shall be submitted with the Registration/Permit Application, and upon receipt of annual renewal notices.

<input type="checkbox"/> Limited Quantity Hauling Exemption (1–4 names)	\$ 25.00
(5–9 names: \$5 additional per name; 10 names or more: \$50 total fee)	
<input type="checkbox"/> Small Quantity Generator <i>without</i> On-site Treatment	25.00
(Generates less than 200 pounds per month)	
<input type="checkbox"/> Small Quantity Generator <i>with</i> On-site Treatment (paid every two years)	100.00
(Medical waste treatment by autoclaving, incineration, microwave technology, or other approved alternative technology)	
<input type="checkbox"/> Common Storage Facility	
<input type="checkbox"/> Serving 2–10 generators	100.00
<input type="checkbox"/> Serving 11–49 generators	250.00
<input type="checkbox"/> Serving 50 or more generators	500.00
<input type="checkbox"/> Trauma Scene Waste Management Practitioner	200.00

LARGE QUANTITY GENERATORS FACILITY TYPES*

(200 pounds or more per month. Program inspectors may ask to examine licenses issued by other state agencies)

	Annual Fee Amount Without Treatment	Annual Fee Amount With On-site Treatment
<input type="checkbox"/> Acute Care Hospitals		
<input type="checkbox"/> 1–99 beds licensed capacity	\$ 600.00	\$ 900.00
<input type="checkbox"/> 100–199 beds	860.00	1,360.00
<input type="checkbox"/> 200–250 beds	1,100.00	1,600.00
<input type="checkbox"/> 251 or more beds	1,400.00	2,400.00
<input type="checkbox"/> Skilled Nursing Facility		
<input type="checkbox"/> 1–99 beds	275.00	575.00
<input type="checkbox"/> 100–199 beds	350.00	650.00
<input type="checkbox"/> 200 or more beds	400.00	700.00
<input type="checkbox"/> Specialty Clinic (surgical, dialysis, etc.)	350.00	650.00
<input type="checkbox"/> Acute Psychiatric Hospital	200.00	500.00
<input type="checkbox"/> Intermediate Care	300.00	600.00
<input type="checkbox"/> Primary Care Clinic	350.00	650.00
<input type="checkbox"/> Clinical Laboratory	200.00	500.00
<input type="checkbox"/> Health Care Service Plan Facility	350.00	650.00
<input type="checkbox"/> Veterinary Clinic or Hospital	200.00	500.00
<input type="checkbox"/> Medical/Dental/Veterinary Office	200.00	500.00

*Refer to California Health and Safety Code, Section 117995.

OTHER FACILITY TYPES AND FEES

<input type="checkbox"/> Medical Waste Transfer Stations (initial and annual renewal plus \$100 per hour initial application review fee)	\$ 2,000.00 annual fee.
<input type="checkbox"/> Off-site Medical Waste Treatment Facility (initial review and processing fee applies: \$100 per hour. A \$25,000 minimum initial application deposit is required. Any balance remaining after processing is refunded.)	\$ 0.002 per pound treated, or \$10,000.00 per year minimum annual fee.